

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Legacy Political Fund

ADDRESS (number and street) ▼

PO Box 77076

☐ Check if different than previously reported. (ACC)

Fort Worth

TX

76177

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00437376

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2014

through

M M M / D D D / Y Y Y Y Y Y
03 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Steve Taylor

Signature of Treasurer

Steve Taylor

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 15 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Legacy Political Fund

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 01 / 01 / 2014

To:

 M M / D D / Y Y Y Y Y
 03 / 31 / 2014

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2014 | | 4713.90 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 4713.90 | |
| (c) Total Receipts (from Line 19) | 13075.52 | 13075.52 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 17789.42 | 17789.42 |
| 7. Total Disbursements (from Line 31) | 16773.69 | 16773.69 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 1015.73 | 1015.73 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 50326.66 | |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Legacy Political Fund

Report Covering the Period:

From:

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 01 | | 2014 |

To:

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 31 | | 2014 |

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

4750.00

4750.00

(ii) Unitemized

225.00

225.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

4975.00

4975.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

4975.00

4975.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

48.33

48.33

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

8052.19

8052.19

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

13075.52

13075.52

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

13075.52

13075.52

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 8083.28 | 8083.28 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 8083.28 | 8083.28 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 8690.41 | 8690.41 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 16773.69 | 16773.69 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 16773.69 | 16773.69 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 4975.00 | 4975.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4975.00 | 4975.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | 8083.28 | 8083.28 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 48.33 | 48.33 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | 8034.95 | 8034.95 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Legacy Political Fund

Full Name (Last, First, Middle Initial)

A. Brandon Birtcher

Mailing Address 18201 Bon Karman Ave, Suite 1170

City State Zip Code
Irvine CA 92612

FEC ID number of contributing
federal political committee.

C

Name of Employer

Birtcher Development & Invest.

Occupation

President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 12 / 2014

Transaction ID : SA11AI.6920

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ellen Davis

Mailing Address 1861 Runnymede Rd

City State Zip Code
Winston Salem NC 27104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 24 / 2014

Transaction ID : SA11AI.6907

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Lesha Elsenbrook

Mailing Address 3 Pine Crescent Ct

City State Zip Code
Houston TX 77024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 10 / 2014

Transaction ID : SA11AI.6875

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Legacy Political Fund

Full Name (Last, First, Middle Initial)

A. Thomas Elsenrbook

Mailing Address 3 Pine Crescent Ct

City

Houston

State

TX

Zip Code

77024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alvarez & Marsal

Occupation

Business Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 10 / 2014

Transaction ID : SA11AI.6942

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Troy Isaacs

Mailing Address 1745 Bison Meadow Ln

City

Heath

State

TX

Zip Code

75032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Modern Senior Living

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 24 / 2014

Transaction ID : SA11AI.6908

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Tim Macy

Mailing Address 109 Jumper Ct

City

Folsom

State

CA

Zip Code

95630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gun Owners of America

Occupation

Vice Chairman

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 10 / 2014

Transaction ID : SA11AI.6904

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

4750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 8 OF 21

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Legacy Political Fund

Full Name (Last, First, Middle Initial)

A. Jane Abraham

Mailing Address 8016 Greenwich Woods Dr

City State Zip Code
 McLean VA 22102

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Susan B. Anthony List

Occupation
 Chairman of the Board

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.37

Date of Receipt

M M / D D / Y Y Y Y Y
 02 / 02 / 2014

Transaction ID : SA17.6924

Amount of Each Receipt this Period

238.37

Non-Contribution Acct: Contribution

Full Name (Last, First, Middle Initial)

B. Ellen Davis

Mailing Address 1861 Runnymede Rd

City State Zip Code
 Winston Salem NC 27104

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Homemaker

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1609.61

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA17.6925

Amount of Each Receipt this Period

609.61

Non-Contribution Acct: Contribution

Full Name (Last, First, Middle Initial)

C. Lesha Elsenbrook

Mailing Address 3 Pine Crescent Ct

City State Zip Code
 Houston TX 77024

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Homemaker

Occupation
 Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.74

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 10 / 2014

Transaction ID : SA17.6933

Amount of Each Receipt this Period

476.74

Non-Contribution Acct: Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1324.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 21

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Legacy Political Fund

Full Name (Last, First, Middle Initial)

A. Steven T. Kirby

Mailing Address 24 Riverview Hgts

City

Sioux Falls

State

SD

Zip Code

57105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bluestem Capital Company LLC

Occupation

Private Equity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.37

Date of Receipt

01 / 13 / 2014

Transaction ID : SA17.6931

Amount of Each Receipt this Period

238.37

Non-Contribution Acct: Contribution

Full Name (Last, First, Middle Initial)

B. Mary Kay Inc.

Mailing Address 16251 N Dallas Pkwy

City

Addison

State

TX

Zip Code

75001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

02 / 12 / 2014

Transaction ID : SA17.6917

Amount of Each Receipt this Period

5000.00

Non-Contribution Acct: Contribution

Full Name (Last, First, Middle Initial)

C. David McQuiston

Mailing Address 13109 Crane Canyon Loop

City

Colorado Springs

State

CO

Zip Code

80921

FEC ID number of contributing
federal political committee.

C

Name of Employer

CEO Forum

Occupation

CEO/President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.74

Date of Receipt

01 / 30 / 2014

Transaction ID : SA17.6926

Amount of Each Receipt this Period

476.74

Non-Contribution Acct: Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5715.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 21

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Legacy Political Fund

Full Name (Last, First, Middle Initial)

A. Christian Taylor

Mailing Address 515 Santa Paula Dr

City State Zip Code
 Salinas CA 93901

FEC ID number of contributing
federal political committee.

C

Name of Employer

ARC Solutions

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 03 2014

Transaction ID : SA17.6944

Amount of Each Receipt this Period

350.00

Non-Contribution Acct: Contribution

Full Name (Last, First, Middle Initial)

B. Steve Taylor

Mailing Address 515 Santa Paula Dr

City State Zip Code
 Salinas CA 93901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Veritas V

Occupation

Retired CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 15 2014

Transaction ID : SA17.6930

Amount of Each Receipt this Period

476.74

Non-Contribution Acct: Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

826.74

7866.57

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

Legacy Political Fund

A. Constant Contact

Category/
Type

69.29

State: District:

B. Intuit

MM / DD / YYYY

Candidate Name

Category/
Type

458.33

State: District:

C. Jamie King

Candidate Name

Category/
Type

2000.00

State: District:

2527.62

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 21

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Legacy Political Fund

Full Name (Last, First, Middle Initial)

A. Jamie King

Mailing Address 106 Panorama Ct

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Trophy Club | TX | 76262 |

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 30 | | 2014 |

Transaction ID : SB21B.6884

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Jamie King

Mailing Address 106 Panorama Ct

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Trophy Club | TX | 76262 |

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 30 | | 2014 |

Transaction ID : SB21B.6885

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. George Seay IIIMailing Address 325 North Saint Paul St
Suite 3500

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Dallas | TX | 75201 |

Purpose of Disbursement
PAC Event Expense: Reception/Food & Bev./AV Support

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 16 | | 2014 |

Transaction ID : SB21B.6886

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 4500.00 |
|---------|

| |
|---------|
| 7027.62 |
|---------|

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 21

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Legacy Political Fund

Full Name (Last, First, Middle Initial)

A. JetBlue

Mailing Address 1212 New York Ave NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20005 |

Purpose of Disbursement
Airfare

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 01 | | 28 | | 2014 |

Transaction ID : SB29.6902.0

Amount of Each Disbursement this Period

| |
|--------|
| 328.00 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Jamie King

Mailing Address 106 Panorama Ct

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Trophy Club | TX | 76262 |

Purpose of Disbursement
Non-Contribution Acct: Fundraising Consulting

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 10 | | 2014 |

Transaction ID : SB29.6939

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. Valentine Direct Marketing LLC

Mailing Address 5415 Maple Ave, Suite 230

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Dallas | TX | 75235 |

Purpose of Disbursement
Non-Contribution Acct: Printing

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03 | | 10 | | 2014 |

Transaction ID : SB29.6941

Amount of Each Disbursement this Period

| |
|---------|
| 1236.43 |
|---------|

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

| |
|---------|
| 3236.43 |
|---------|

| |
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| |
|--|

| | | | | | | | | | | | |
|--|-----|--|-----|--|-----|--|-----|--|------|--|-----|
| | 21b | | 22 | | 23 | | 24 | | 25 | | 26 |
| | 27 | | 28a | | 28b | | 28c | | X 29 | | 30b |

Legacy Political Fund

A. Hannah Zandstra

Mailing Address 2007 S 11th St

| | | |
|------|-------|----------|
| City | State | Zip Code |
| Waco | TX | 76706 |

| |
|---|
| Purpose of Disbursement |
| Non-Contribution Acct: Event Support Consulting |

Candidate Name

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB29.6954

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

300.00

TOTAL This Period (last page this line number only).....

8467.22

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Legacy Political Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Jamie King

Nature of Debt (Purpose):

PAC Fundraising Consulting

Mailing Address 106 Panorama Ct

City State

Zip Code

Trophy Club

TX

76262

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.6866

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Koch & Hoos, LLC

Nature of Debt (Purpose):

PAC Accounting/Compliance Services

Mailing Address 901 N Washington St, Ste 700

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

2267.75

Transaction ID : SD10.6869

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3767.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Pixl Production

Nature of Debt (Purpose):

PAC Website Development

Mailing Address 1845 Woodall Rodgers, Suite 1725

City

State

Zip Code

Dallas

TX

75201

Outstanding Balance Beginning This Period

1966.32

Transaction ID : SD10.6867

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1966.32

1) SUBTOTALS This Period This Page (optional)..... ►

5734.07

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

0.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Legacy Political Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

George Seay III

Nature of Debt (Purpose):

PAC Event Expense: Reception/Food &
Bev./AV SupportMailing Address 325 North Saint Paul St
Suite 3500City State Zip Code
Dallas TX 75201

Outstanding Balance Beginning This Period

3441.00

Transaction ID : SD10.6679

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

1441.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

PAC Event Expense: Reception/Food &
Bev./AV Support

Mailing Address 515 Santa Paula Dr

City State Zip Code
Salinas CA 93901

Outstanding Balance Beginning This Period

3426.14

Transaction ID : SD10.6845

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3426.14

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

PAC Event Expense: Reception/Food &
Bev./AV Support

Mailing Address 515 Santa Paula Dr

City State Zip Code
Salinas CA 93901

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD10.6846

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) SUBTOTALS This Period This Page (optional)..... ►

9867.14

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

0.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Legacy Political Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

PAC Event Expense: Reception/Food &
Bev./AV Support

Mailing Address 515 Santa Paula Dr

City State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD10.6847

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Non-Contribution Acct: PAC Event Deposit

Mailing Address 515 Santa Paula Dr

City State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

11950.00

Transaction ID : SD10.6860

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11950.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

PAC Event Expense: Reception/Food &
Bev./AV Support

Mailing Address 515 Santa Paula Dr

City

State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

10230.07

Transaction ID : SD10.6848

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10230.07

1) SUBTOTALS This Period This Page (optional)..... ►

27180.07

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

0.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Legacy Political Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Reimbursement: Travel Expense

Mailing Address 515 Santa Paula Dr

City State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

2733.25

Transaction ID : SD10.6852

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2733.25

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Reimbursement: Travel Expense

Mailing Address 515 Santa Paula Dr

City State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

740.89

Transaction ID : SD10.6853

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

740.89

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Reimbursement: Travel Expense

Mailing Address 515 Santa Paula Dr

City

State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

714.80

Transaction ID : SD10.6854

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

714.80

1) SUBTOTALS This Period This Page (optional)..... ►

4188.94

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

0.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Legacy Political Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Reimbursement: Travel Expense

Mailing Address 515 Santa Paula Dr

City State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

562.46

Transaction ID : SD10.6855

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

562.46

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Reimbursement: Travel Expense

Mailing Address 515 Santa Paula Dr

City State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

992.77

Transaction ID : SD10.6856

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

992.77

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Reimbursement: Travel Expense

Mailing Address 515 Santa Paula Dr

City

State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

635.31

Transaction ID : SD10.6858

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

635.31

1) SUBTOTALS This Period This Page (optional)..... ►

2190.54

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

0.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 21

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Legacy Political Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Reimbursement: Travel Expense

Mailing Address 515 Santa Paula Dr

City State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

553.83

Transaction ID : SD10.6859

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

553.83

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steve Taylor

Nature of Debt (Purpose):

Reimbursement: Travel Expense

Mailing Address 515 Santa Paula Dr

City State

Zip Code

Salinas

CA

93901

Outstanding Balance Beginning This Period

612.07

Transaction ID : SD10.6861

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

612.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

1165.90

2) TOTALS This Period (last page this line number only)..... ►

50326.66

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

50326.66